## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

## **Provider Inspection Summary**

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: NEW BEGINNINGS (0010663)

Address: 402 RAINTREE DR, FORT ATKINSON, WI 53538

**License Status: REGULAR** 

Licensed/Certified/Registered 09/01/2004

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

**Survey History** 

Survey ID: 0094175 End Date: 02/25/2005 Type: STANDARD Purpose: SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0093209 End Date: 09/01/2004 Type: INITIAL Purpose: SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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